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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

11/10/98  
jc408 U.S. PTO

Socket No. A-66828-1/DJB/RMS

Anticipated Classification of  
this Application:

Class: Subclass:

Prior Application: 60/090,473

Examiner:

Art Unit:

"EXPRESS MAIL" MAILING LABEL  
NUMBER EL117283480US

DATE OF DEPOSIT November 10, 1998

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING  
DEPOSITED WITH THE UNITED STATES POSTAL SERVICE  
"EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER  
37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS  
ADDRESSED TO: BOX PATENT APPLICATION, ASSISTANT  
COMMISSIONER FOR PATENTS, WASHINGTON, DC 20231.

TYPED NAME Geody Domingo

SIGNED *Geody Domingo*

**Box PATENT APPLICATION**

Assistant Commissioner for Patents  
Washington, DC 20231

Sir:

This is a request for filing an

☐ Original

☐ Continuation

☐ Divisional

☒ Continuation-in-part

application under 37 C.F.R. 1.53(b), in the name of Mark Chee, et al. for  
DECODING OF ARRAY SENSORS WITH MICROSPHERES. This ☐ continuation ☐  
divisional ☒ continuation-in-part claims priority to pending application  
Serial No. 60/090,473, filed on June 24, 1998.

1. (a) ☐ Enclosed is a new application.
- (b) ☒ Enclosed is a continuation-in-part application.
- (c) ☐ Enclosed is a copy of the prior application.

2. (a) ☐ Enclosed is a new Declaration.  
(b) ☐ Enclosed is a copy of the prior executed Declaration and Power of Attorney for Patent Application as originally filed.  
(c) ☐ Enclosed is a Combined Declaration/Power of Attorney.
3. (a) ☐ Enclosed is a Small Entity Affidavit.  
(b) ☐ A Small Entity Affidavit is of record in the prior application.

4. X The filing fee is calculated below:

5.   X   The Commissioner is hereby **NOT** authorized to charge any additional fees which may be required, including extension fees, or credit any overpayment to Deposit Account No. 06-1300.
6.   X   No check is enclosed.
7.        Cancel in this application original claims \_\_\_\_\_ of the prior application before calculating the filing fee. (At least one independent claim must be retained for filing purposes.)
8.   X   Amend the specification by inserting before the first line the sentence:

9. (a) X No drawings are enclosed.  
(b) \_\_\_\_\_ Formal drawings are enclosed.

10. (a) \_\_\_\_\_ Priority of application Serial No. \_\_\_\_\_ filed on \_\_\_\_\_  
\_\_\_\_\_ in \_\_\_\_\_ is claimed under 35  
U.S.C. 119.

(b) \_\_\_\_\_ The certified copy has been filed in prior application  
Serial No. \_\_\_\_\_ filed on \_\_\_\_\_.

11. \_\_\_\_\_ An Assignment is enclosed.

12. \_\_\_\_\_ The prior application is assigned of record to \_\_\_\_\_  
\_\_\_\_\_.

13. \_\_\_\_\_ A Power of Attorney by Assignee is enclosed.

14. X \_\_\_\_\_ The power of attorney in the prior application is to:  
\_\_\_\_\_ FLEHR HOHBACH TEST ALBRITTON & HERBERT LLP \_\_\_\_\_  
(name)  
\_\_\_\_\_ Suite 3400, Four Embarcadero Center \_\_\_\_\_  
(address)  
\_\_\_\_\_ San Francisco, California 94111-4187 \_\_\_\_\_

(a) \_\_\_\_\_ The power appears in the original papers in the prior  
application.

(b) \_\_\_\_\_ Since the power does not appear in the original papers, a copy  
of the power in the prior application is enclosed.

(c) \_\_\_\_\_ Address all future communications to:  
FLEHR HOHBACH TEST ALBRITTON & HERBERT LLP  
Suite 3400, Four Embarcadero Center  
San Francisco, California 94111-4187  
Telephone: (415) 781-1989

15. \_\_\_\_\_ A preliminary amendment is enclosed. (Claims added by this  
amendment have been properly numbered consecutively beginning  
with the number next following the highest numbered original  
claim in the prior application.)

16. \_\_\_\_\_ A Prior Art Statement is enclosed.

17. \_\_\_\_\_ I hereby verify that the attached papers are a true duplicate of prior application Serial No. \_\_\_\_\_ as originally filed on \_\_\_\_\_.

Date: November 10, 1998

Robin M. Silva  
Robin M. Silva  
Reg. No. 38,304

Address of Signer: \_\_\_\_\_ X Attorney or agent of record

FLEHR HOHBACH TEST \_\_\_\_\_ Filed under Section 1.34(a)

ALBRITTON & HERBERT LLP

Suite 3400, Four Embarcadero Center

San Francisco, California 94111-4187

66077-1-4565750